APPLICATION FOR TEMPORARY CERTIFICATE

| | Date | |
|--|--|--|
| I, hereby apply for a Temporary Certificate to practice or offer to practice the profession of Engineering in the State of Maine for the following period(s). (Not to exceed 30 consecutive days in any calender year): Indicate dates required below. | | |
| | S FOR PROCESSING) and located as follows: | |
| | | |
| | | |
| | · | |
| | the with the Rules and Regulations of the State Board of Registration for the Revised Statutes of Maine, 1964, Title 32, chapter 19, Subchapter I, | |
| I enclose a check () money order TREASURER, STATE OF MAIN | r () in the amount of \$100.00 (U.S. Funds) to cover the fee, payable to NE. | |
| 1 | . GENERAL INFORMATION | |
| 1. Name (as desired on Temporar | y Certificate) | |
| 2. Business Address | | |
| (N | Tame of employer) | |
| (Mailing address) | (City or Town) (State) (Zip) | |
| 3. Residence (Mailing address) | (City or town) (State) (Zip) | |
| 4. Citizen of | | |
| 5. State or Province in which regi | stered as a Professional Engineer | |
| Date of Registration | Cort# | |

| 6. Qualified for registration as follows: (circle a | appropriate no.) |
|---|--|
| Exemption (grandfather clause). Examination of qualifications without the examination. Written examination 8 hours in Fundamental Programment (a) 1 in Fundamental Programment (a) 2 in Fundament (a) 2 in | out oral or written examination. ndamentals of Engineering; 8 hours in |
| Principles and Practice of Engineering. | |
| | |
| | JCATION |
| 1. Name of Institution | |
| Years Attended | |
| Graduation Date | |
| Courses completed or degree achieved | |
| | erstand that the correctness and truth of my statements as ssuance of the Temporary Certificate to practice or offer to d for. |
| | (Signature of Applicant) |
| STATE OF | |
| COUNTY OF | |
| | DATE |
| (Name of Applicant) | of (City or Town) |
| State of, being duly sworn, says the Maine State Board of Registration for Profe contained are each and all strictly true in every | nat is the person named in the above application to essional Engineers and that the statements therein respect. |
| Subscribed and sworn to before me thisd | lay ofYear |
| Seal/StampNotary Public | Justice of the Peace |
| Applicants Fax #Phone # | <u> </u> |
| ALLOW TEN DAYS FOR PROCESSING | |

Mail to: Professional Engineers, 92 State House Station, Augusta, Maine 04333

Delivery Address: Professional Engineers, Airport Terminal Bldg., 2nd Floor, Augusta, ME 04330